

SES APPLICATION**Part B****PROVIDER SERVICE SUMMARY**

(This information will be available to parents and local school districts)

PROVIDER INFORMATION

NAME OF PROVIDER:

New Madrid County R-1 School District

MAILING ADDRESS:

310 US Highway 61

CITY:

New Madrid

STATE:

MO

ZIP CODE:

63869

PHONE NUMBER:

(573) 688-2161

FAX NUMBER:

(573) 688-2169

E-MAIL ADDRESS:

bmance@yahoo.com

PRIMARY CONTACT INFORMATION

NAME:

Bill Nance

PHONE NUMBER:

(573) 688-2161

E-MAIL ADDRESS:

bmance@yahoo.com

SERVICES**Provider status:**

- ☐ For-profit organization
☐ Non-profit organization
☐ Faith-based organization

- ☒ School district
☐ Individual
☐ Other:

Areas to be served by provider:

- ☐ All school districts in Missouri
☒ Specific districts or counties. Please list: New Madrid County R-1

Number of sessions per week: 4**Cost per session:** \$30.00**Proposed location of service delivery:**

- ☒ Student's school site
☐ Provider site
☐ Other:

If service delivery is not at the student's school, is transportation provided? If so, is there a separate fee?
(Note: Districts are not required to provide or pay for transportation).

n/a

Certification of instructors:

- ☒ Baccalaureate degree in education
☐ Baccalaureate degree in related field of instruction. Please list related field(s):
☐ Reading Specialist
☐ Other: _____

Additional education and/or experience:

- ☐ Masters level degrees or above in either reading or mathematics
☒ Missouri teacher certificated/licensed teachers
☐ Experience teaching students with specific disabilities
☐ Experience teaching LEP students
☐ Ability to speak languages other than English. Please list:
☐ Other: _____

Tutoring subjects available:

☒ Reading ☒ Writing ☒ Math

Grade Levels Served:

☒ K-2 ☒ 3-5 ☐ 6-8 ☐ 9-12

Title of tutoring curriculum utilized:**Time of Service:**

☐ Before School
☒ After School
☐ Weekends
☐ Summer
☐ Other:

Mode of Instructional Delivery:

☒ Individual Tutoring
☒ Small Group Instruction
☐ On-Line/Web-based
☐ Other:

Specifics of reporting to parents & school (check all that apply):**Method:**

☒ letters
☒ phone calls
☒ conference with parents
☒ conference with parents & school
☐ other:

Frequency:

☐ weekly
☐ bi-monthly
☐ monthly
☒ other: (quarterly)